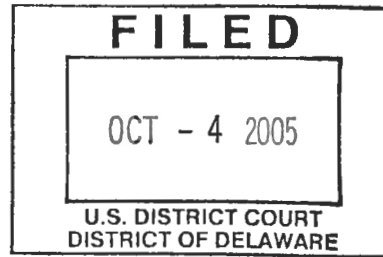


IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF DELAWARE

JOSEPH L. D'ALESSANDRO,)
)
Plaintiff,)
)
v.) Civil Action No. 05-496 GMS
)
JUDGE J. CURTIS JOYNER, CHIEF)
JUDGE SUE L. ROBINSON, JUDGE)
JOSEPH H. RODRIGUEZ, JUDGE)
RUGGERO J. ALDSIERT, JUDGE)
MORTON I. GREENBERG, JUDGE)
MARJORIE O. RENDELL, DISTRICT)
COURT JUDGE JOSEPH FARNAN JR.,)
UNITED STATES OF AMERICA,)
)
Defendants.)

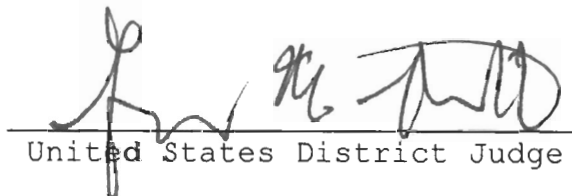


ORDER

The plaintiff, Joseph L. D'Alessandro, a pro se litigant, has filed this action together with a letter requesting that he be permitted to proceed in forma pauperis. The letter does not include financial information regarding the plaintiff.

At Wilmington this 4th day of Oct., 2005,
IT IS ORDERED that:

1. The plaintiff shall complete and submit the attached application to proceed without prepayment of fees.
2. Failure to return the requested information within 30 days from the date this order is sent shall result in dismissal of this action without prejudice.


United States District Judge

**UNITED STATES DISTRICT COURT
DISTRICT OF DELAWARE**

Plaintiff

V.

Defendant(s)

**APPLICATION TO PROCEED
WITHOUT PREPAYMENT OF
FEES AND AFFIDAVIT**

CASE NUMBER:

I, _____ declare that I am the (check appropriate box)

☐ Petitioner/Plaintiff/Movant ☐ Other

in the above-entitled proceeding; that in support of my request to proceed without prepayment of fees or costs under 28 USC §1915, I declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion.

In support of this application, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated? ☐ Yes ☐ No (If "No" go to Question 2)

If "YES" state the place of your incarceration _____

Inmate Identification Number (Required): _____

Are you employed at the institution? _____ Do you receive any payment from the institution? _____

Attach a ledger sheet from the institution of your incarceration showing at least the past six months' transactions

2. Are you currently employed? ☐ Yes ☐ No

a. If the answer is "YES" state the amount of your take-home salary or wages and pay period and give the name and address of your employer.

b. If the answer is "NO" state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer.

3. In the past 12 twelve months have you received any money from any of the following sources?

a. Business, profession or other self-employment	<input type="checkbox"/> Yes	<input type="checkbox"/> No
b. Rent payments, interest or dividends	<input type="checkbox"/> Yes	<input type="checkbox"/> No
c. Pensions, annuities or life insurance payments	<input type="checkbox"/> Yes	<input type="checkbox"/> No
d. Disability or workers compensation payments	<input type="checkbox"/> Yes	<input type="checkbox"/> No
e. Gifts or inheritances	<input type="checkbox"/> Yes	<input type="checkbox"/> No
f. Any other sources	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If the answer to any of the above is "YES" describe each source of money and state the amount received *AND* what you expect you will continue to receive.